

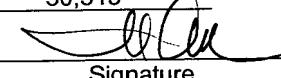


PTO/SB/22 (08-03)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket No. (Optional) N9450.0020/P020										
	In re Application of Soshiro Kuzunuki et al. Application Number 09/879,164-Conf. #3656 Filed June 13, 2001 For: MULTIMEDIA INFORMATION DELIVERY SYSTEM AND MOBILE INFORMATION TERMINAL DEVICE Art Unit 2863 Examiner S. J. Cherry											
	This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.											
	The requested extension and appropriate non-small-entity fee are as follows (check time period desired):											
	<table> <tr> <td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td>\$ _____</td> </tr> <tr> <td><input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td>\$ 950.00</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td>\$ _____</td> </tr> </table>			<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ _____	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ _____	<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ 950.00	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ _____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ _____											
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ _____											
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ 950.00											
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ _____											
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____											
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____												
<input type="checkbox"/> A check in the amount of the fee is enclosed.												
<input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.												
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.												
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 04-1073												
I have enclosed a duplicate copy of this sheet.												
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input type="checkbox"/> attorney or agent of record. Registration Number _____ <input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) 50,515												
April 1, 2004 _____ Date _____ (202) 775-4742 _____ Telephone Number _____												
 Signature _____ Gabriela Coman Typed or printed name _____												
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below												
<input type="checkbox"/> Total of 1 forms are submitted.												

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